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FACTORS INFLUENCING ADHERENCE OF PARENTS TO VACCINATION OF THEIR CHILDREN WITH MUMPS, MEASLES AND RUBELLA (MMR) IN NAJAF DISTRICT, IRAQ

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Background: MMR vaccine administration in proper time is the key of consolidation of immunity for primary prevention of target diseases. Parents' adherences to their child's vaccine doses and the factors that affect their adherence have to be ensured against the serious risk of non-adherence to make it effective primary preventive method. The study will describe the associated parental and social factors that might affect the MMR vaccination adherence associated with hyper endemic cases of Mumps in Najaf Governorate.

Objectives: To describe and analyze the adherence to vaccines and identification of etiological factors behind ignoring of failing to receive MMR vaccine per time. To explore the associated potential socioeconomic, medical and demographic factors that might influence the family members for MMR vaccination schedule. To take an idea, whether the parents are aware of the risk of missing the booster dose of MMR administration to their child in addition to evaluate of MCH activities and health promotion services provided at primary health care level.

Subjects & Methods: Across sectional study that was conducted through selecting of random sample of 400 child below six years from four PHC centers at Najaf district, two PHC in rural areas (Al-haydaria health care center and Al radhawia health care center) and two in urban localities (Al ansar health care center and Syed al shuhadaa health care center); the data was collected during six months from 1st April to 30th September 2017. The data was collected by directly interviewing the parents about their adherence to first and second dose of MMR vaccine through well prepared and validated questionnaire which included information regarding socio-demographic factors about the family, details about the causes of non-adherence to the first and second doses of MMR vaccine and information related to MMR vaccine administration.

Results: As a result, 236 (59%) child were adherent to MMR vaccine and 164 (41%) that non-adherent to vaccine. 62.5% of children received first dose of MMR vaccine at recommended time while 23.8% of them received the second dose of MMR vaccine at time. The most important cause of non-adherence was lack of awareness (31.7%) followed by neglecting (28.7%). There was increase in total number of mumps reported cases in last three years at Najaf discrete ending at 5836 cases in 2017. The adherence rate was higher among children below 2 years, educated families, employed parents and families lived in urban areas.

Conclusions: This study shows a moderate level of adherence to MMR vaccine, the overall rate of non-adherence to MMR vaccine were 41%. Adherence state was influenced by socio-demographic factors (age groups, residence, education and occupation).

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